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Death From Paraquat

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Committee on the welfare of children in hospital in 1959, and commended to hospital authorities by the then Minister of Health.

## Oral Contraceptives

A great deal of alarm and despondency about the use of oral contraceptives had been created by statements in the public media, said Mr. ENNALS in the Commons on 15 December.

He was replying to Mrs. R. SHORT (Wolverhampton, North-East, Lab.), who said that much of the alarm and concern about the findings of the Dunlop Committee stemmed from the television programme by "that stupid little man" David Frost, who must have frightened all women using oral contraceptives.

The exchanges followed a request by Dr. SHIRLEY SUMMERSKILL (Halifax, Lab.) for an inquiry into the adverse effects of oral contraception.

Rejecting the request, Mr. ENNALS said that the Committee on the Safety of Drugs had just issued an early warning to doctors advising them normally to prescribe oral contraceptives containing only 50 µg. of oestrogen, since there was evidence of a lower incidence of thromboembolism among women taking them than among women taking those containing 75 µg. or more of oestrogen. The committee's view was that the reduced dosage would be as effective as the higher one. He welcomed the committee's prompt action, the first of its kind throughout the world, and the first steps to reduce the existing small risk of venous thrombosis associated with the use of the pill. The committee had not seen fit to ask for the higher-dose pills to be withdrawn from the market because there remained some use for them.

## Report in Three Months

Dr. SUMMERSKILL pressed her demand for an inquiry, and Mr. ENNALS said that a detailed report would be published in about three months by the Dunlop Committee, which had thought it right to issue an early warning as soon as it knew the difference was likely to be significant. A good deal of research into the effects of oral contraceptives was being carried out by the Medical Research Council, the Family Planning Association, and the Royal College of General Practitioners into particular questions such as identification and evaluation of adverse reactions and to discover which women were most likely to suffer ill-effects and what were the contraindications to the use of the oral contraceptive.

Mr. P. DEAN (North Somerset, Con.) said the early warning appeared to have received wide publicity before doctors who prescribed had a chance to advise their patients, thus causing alarm to many women and embarrassment to doctors. Would Mr. Ennals ensure that this type of alarm was not created in future?

Mr. ENNALS said that the Dunlop Committee had made careful preparation to ensure that doctors were informed first. It had always been the committee's policy to con-

sult the manufacturers before taking important action affecting them. This had contributed to the good relations which had existed between the industry and the committee.

Manufacturers, in consequence, had been told on Wednesday, 10 December, of the committee's forthcoming recommendations. They had been asked to regard the information as being strictly confidential until the medical profession was generally informed. In spite of this, information about the confidential meeting had leaked within two hours, and the following day, 11 December, the *Daily Express* had carried a prominent article on the subject. This had brought pressure for a statement from the press, radio, and television, as well as patients and doctors. The committee had been put in a difficult situation, and thought it proper to give immediate information so that there would not be uncertainty for several days.

## Family Planning in Hospitals

The Secretary of State for Social Services, Mr. R. Crossman, not content with the situation in many parts of the country, had asked hospital boards and teaching hospitals to review arrangements for providing family planning advice in their hospitals, said Dr. J. DUNWOODY, Under Secretary for Health and Social Security, in the Commons on 15 December. He was replying to Mrs. SHORT, who had asked how many N.H.S. maternity hospitals and departments gave family planning advice to all mothers before or after childbirth as a matter of routine.

Mr. Crossman's letter, dated 11 December, was as follows:

(1) I am sure that hospitals can and should make a further contribution to family planning by providing a service of advice to their patients. Up till now such a service has been little developed in hospitals on the assumption that it would be available elsewhere. But it is the hospitals themselves who can often provide this advice most effectively, and at the same time it is most needed, to any of their women in-patients or outpatients who wish to have it.

(2) Most women being treated at hospital who need family planning advice will be attending obstetric and gynaecological departments of general hospitals. But others needing it will be attending other departments or other hospitals, particularly those for mental illness or for the mentally handicapped.

(3) A service of family planning advice may be provided either direct by the hospital service itself or by arrangement with the hospital service by a voluntary organization (usually the Family Planning Association) on its behalf. In deciding which of these arrangements is to be preferred in a particular district and generally in settling the arrangements required, the Board will need to consult not only with the hospital management committee concerned but with their obstetric and gynaecological staff. There are obvious advantages from the standpoint of teaching in making this provision.

(4) Naturally the services provided in hospitals must be co-ordinated with the services provided by local health authorities, general practitioners, and voluntary organizations so that a comprehensive family service is available for the districts they are serving. The maternity liaison committees which already exist can help to promote this co-ordination.

(5) I should be grateful if you would review the arrangements for providing family planning

advice in your hospitals and let me know what more you propose to do to develop these arrangements so that an effective service is available for all women patients.

## Travellers' Typhoid

The Department of Health and Social Security will issue information in the next few months to travel agents and others associated with the tourist trade about precautions against typhoid so that they can pass the appropriate advice to travellers, said Dr. DUNWOODY on 15 December.

Mr. T. KITSON (Richmond, Yorks, Con.) had asked for legislation to compel people who had not been inoculated against typhoid fever and returning to this country from areas where it was endemic to leave a forwarding address so that they could be contacted in the event of an outbreak.

Dr. DUNWOODY said that British arrangements conformed with international requirements and practice and were in general satisfactory. A requirement to notify addresses would create undue difficulties for travellers and was permissible under international sanitary regulations only in situations where there was grave danger to public health.

The problem should be kept in perspective. There had been 129 notifications of typhoid in this country so far this year and one death.

## MEDICO-LEGAL

### Death from Paraquat

[FROM OUR LEGAL CORRESPONDENT]

A verdict of accidental death was recorded by a Manchester coroner on Mr. John Garner, aged 56, of Davyhulme, Lancashire, who died after drinking paraquat.<sup>1</sup> Mr. Garner had taken a drink from a bottle in his garden shed where he kept home-brewed beer in lemonade bottles.

Mr. Nigel Wright, technical officer for Plant Protection Limited, a subsidiary of I.C.I. who manufacture paraquat, said that since 1962 many millions of gallons had been distributed throughout the world, and in that time there had been 30 deaths as a result of people drinking it from unlabelled containers.

<sup>1</sup> *The Times*, 11 December 1969.

### Nurses Committed for Trial

[FROM OUR LEGAL CORRESPONDENT]

The preliminary investigation by Portishead Magistrates, Somerset, into charges alleging ill-treatment of mentally subnormal patients at Farleigh Hospital, Flax Bourton, Somerset, has been completed.<sup>1</sup> (See 23 August, p. 481.)

The magistrates committed six nurses for trial at Somerset Assizes on a number of charges.

Three other nurses were discharged by the magistrates, there being no case for them to answer. The nurses who were cleared were William Clifford Jefferis, aged 45, Godfrey Frederick Passmore, aged 39, and David Michael Burge, aged 28.

<sup>1</sup> *The Times*, 11 December 1969.